

DATE GIVEN: _____

DATE RECEIVED: _____

NAME: A. Colman

SERIAL NUMBER: _____

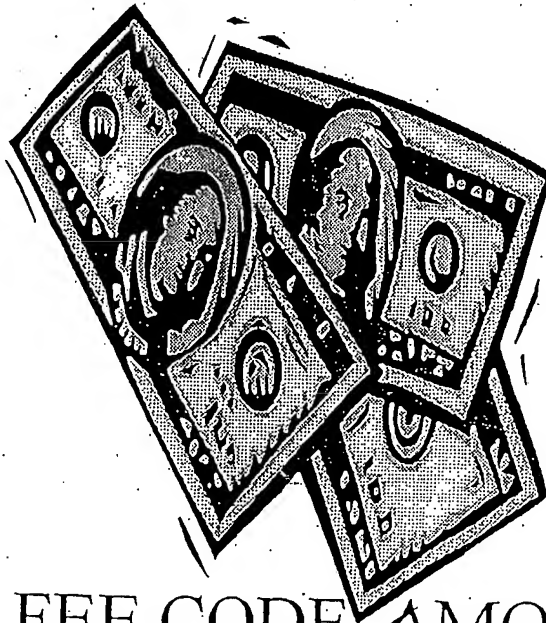
Time Out _____

Time In _____

Is there a refund due on
this case?

Specials

2 Hour Time



Completed

Removed

☒ YES

FEE CODE AMOUNT

☐ NO

REASON FOR DENIAL

• PLEASE RETURN TO

*Your
Supervisor*

~~Mrs. Rita White~~ so it can be removed
from refund list.

Slattery

ATTENTION ATTENTION ATTENTION

Method of Refund:

☐ ACH/EFT

☐ Credit Card

☒ Deposit Account # 08-3284

☐ Treasury Check

Patent/TM/App/Serial # 10,587,312

Program Area PCT National

Date Processed 02-07-07

ATTENTION ATTENTION ATTENTION